

FIG. 1

Parallel Fan Powered VAV Terminal w/ heat Delivery Book

MODEL VERIFICATION		Unit Tag (FPVAV)
		VAV A-4
1. Manufacturer	Submitted	
	Delivered	
2. Model Number	Submitted	
	Delivered	
3. Max/Min Airflow (cfm)	Submitted	/
	Delivered	/
4. Serial Number	Submitted	N/A
	Delivered	
5. Inlet Diameter, inches	Submitted	
	Delivered	
6. Heating MBH/gpm	Submitted	/
	Delivered	/
7. Fan Power/Speed, (hp/rpm)	Submitted	/
	Delivered	/
8. Total Static Pressure, in w.g.	Submitted	
	Delivered	
<b>PHYSICAL CHECKS</b>		
1. The box is free of physical damage		yes / no
2. The air openings to the box are sealed with durable plastic		yes / no
3. The airflow sensing tubing is plugged		yes / no
4. The local electrical disconnect is in the proper location		yes / no
<b>PHYSICAL CHECKS</b>		
5. The enclosure for the DDC control panel is in the proper location		yes / no
6. The grommets for the airflow sensing tubing are secure		yes / no
7. Unit tags affixed		yes / no
8. Manufacturer's ratings readable/accurate		yes / no
<b>Tracking Cards</b>		
1. Pull the Appropriate Tracking Card Labeled ----->		VAV A-4

"No"  
Responses:

Item	Reason for "No"	Item

10948110-05001

FIG. 2

**Parallel Fan Powered VAV Terminal w/ heat # \_\_\_\_\_ [Fill in Tag #]**

**Hanging**

[fill in box number]

Instructions: Step 1: Circle Yes or No, or fill in with requested information.  
 Step 2: Explain all "No" responses at the bottom of the card.  
 Step 3: Attach bar code sticker from equipment when finished, return card to your Field Supervisor.

Item		Response	
		Yes	No
1	Unit identification tag easily visible		
2	Unit is individually supported from structure and not from adjacent ductwork		
3	Adequate clearance around control box for maintenance		
4	Clear access below box to remove bottom access panel for easy maintenance		
5	Metal to metal connections eliminated to prevent noise problems		
6	All shipping and installation materials are removed		
7	Box openings temporarily sealed to maintain system cleanliness		

**"No" Responses** ←

Item	Reason for "No"

Place Sticker Here

FIG. 3

**Parallel Fan Powered VAV Terminal w/ heat # \_\_\_\_\_ [Fill in Tag #]**

**Connecting Ductwork**

[fill in box number]

Instructions: Step 1: Circle Yes or No, or fill in with requested information.  
 Step 2: Explain all "No" responses at the bottom of the card.  
 Step 3: Attach bar code sticker from equipment when finished, return card to your Field Supervisor.

Item		Response	
		Yes	No
1	Balancing damper present on inlet duct		
2	1 1/2 diameters of straight ductwork installed prior to VAV box damper		
3	Ductwork free of transitions for at least 36"		
4	Maintainable items (actuators, dampers, sensors, etc.) are accessible for easy maintenance		
5	Flexible connector (vibration isolator) installed on inlet duct to avoid noise problems from metal to metal contact		
6	Flex duct is installed in a way that avoids forming kinks on both inlet and outlet ductwork		

**"No" Responses** ←

Item	Reason for "No"

Place Sticker Here

FIG. 4

**Parallel Fan Powered VAV-Terminal w/ heat # \_\_\_\_\_ [Fill in Tag #]**

**Piping Installation**

[fill in box number]

Instructions: Step 1: Circle Yes or No, or fill in with requested information.  
 Step 2: Explain all "No" responses at the bottom of the card.  
 Step 3: Attach bar code sticker from equipment when finished, return card to your Field Supervisor.

Item		Response	
1	Piping is fully supported	Yes	No
2	Control valve and maintainable items are accessible	Yes	No
3	The following components are installed, from supply line to return line:	Yes	No
4	Ball valve		
5	Union-Coil-Union		
6	Manual air vent		
7	Pete's Plug		
8	2-way automatic control valve		
9	Manual drain valve		
10	Manual flow meter valve		

**"No" Responses** ←

Item	Reason for "No"

Place Sticker Here

FIG. 5

**Parallel Fan Powered VAV Terminal w/ heat # \_\_\_\_\_ [Fill in Tag #]**

**Controls Installation**

[fill in box number]

Instructions: Step 1: Circle Yes or No, or fill in with requested information.  
 Step 2: Explain all "No" responses at the bottom of the card.  
 Step 3: Attach bar code sticker from equipment when finished, return card to your Field Supervisor.

Item		Response	
1	Point-to-point connections of control wiring verified	Yes	No
2	Temperature sensor calibration verified	Yes	No
3	Central system accurately represents conditions of VAV box	Yes	No

**"No" Responses** ←

Item	Reason for "No"

Place Sticker Here

FIG. 6

Parallel Fan Powered VAV Terminal w/ heat # \_\_\_\_\_ [Fill in Tag #]

Electrical

[fill in box number]

Instructions: Step 1: Circle Yes or No, or fill in with requested information.  
 Step 2: Explain all "No" responses at the bottom of the card.  
 Step 3: Attach bar code sticker from equipment when finished, return card to your Field Supervisor.

Item		Response	
		Yes	No
1	Local disconnect installed in accessible location		
2	Variable speed selector switch is operational		
3	Motor rotation in proper direction		
4	P.E. switch is operational		

"No" Responses ←

Item	Reason for "No"

Place Sticker Here

0544310-030301

FIG. 7

Parallel Fan Powered VAV Terminal w/ heat Contractor Book										
Controls Start-up										
	VAV A-4									
1. Cooling/heating (when present) sequence of control correct	yes / no									
2. Warm-up/cool-down sequence of control correct	yes / no									
3. Unoccupied sequence of control correct	yes / no									
<div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;"> <p><b>"No"</b> Responses:</p> </div> <table border="1" style="border-collapse: collapse; width: 100%;"> <thead> <tr> <th style="width: 15%;">Item</th> <th style="width: 70%;">Reason for "No"</th> <th style="width: 15%;">Item</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> </div>		Item	Reason for "No"	Item						
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FIG. 8

Parallel Fan Powered VAV Terminal w/ heat Contractor Book							
TAB							
	VAV A-4						
1. Modifying unit/system settings through temperature sensor working	yes / no						
2. Airflow sensor calibration verified	yes / no						
3. Minimum airflow, cfm (design/measured)	/						
4. Maximum airflow, cfm (design/measured)	/						
<div style="display: flex; align-items: flex-start;"> <div style="margin-right: 10px;"> <p><b>"No"</b> Responses:</p> </div> <table border="1" style="border-collapse: collapse; width: 100%;"> <thead> <tr> <th style="width: 15%;">Item</th> <th style="width: 85%;">Reason for "No"</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table> </div>		Item	Reason for "No"				
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 <p>VAV Terminal w/ heat VAV A-4 Controls Start-up</p>	 <p>VAV Terminal w/ heat VAV A-4 TAB</p>	 <p>VAV Terminal w/ heat VAV A-4 Delivery Book</p>
 <p>VAV Terminal w/ heat VAV A-4 Hanging</p>	 <p>VAV Terminal w/ heat VAV A-4 Connecting Ductwork</p>	 <p>VAV Terminal w/ heat VAV A-4 Piping Installation</p>
 <p>VAV Terminal w/ heat VAV A-4 Controls Installation</p>	 <p>VAV Terminal w/ heat VAV A-4 Electrical</p>	

FIG. 10

**Piping Installation**Date: \_\_\_\_\_  
[fill in current date]

**Instructions:** Step 1: Circle Yes or No, or fill in with requested information.  
Step 2: Explain all "No" responses at the bottom of the card.  
Step 3: Describe work completed today and return card to your Field Supervisor.

Item	Task Description	Response	
		Yes	No
1	Piping is clean and free of damage prior to installation	Yes	No
2	Maximum support spacing is according to table on back, or closer as necessary	Yes	No
3	All connections meet specification requirements	Yes	No
4	All equipment requiring maintenance is accessible (valves, junction boxes, etc.)	Yes	No
5	All pipe openings temporary sealed to maintain duct system cleanliness	Yes	No
6	Record drawings have been updated to reflect any changes made	Yes	No

"No" Responses

Item	Reason for "No"

Briefly Detail Work Completed Today

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FIG. 11

**Ductwork Installation**Date: \_\_\_\_\_  
[fill in current date]

**Instructions:** Step 1: Circle Yes or No, or fill in with requested information.  
Step 2: Explain all "No" responses at the bottom of the card.  
Step 3: Describe work completed today and return card to your Field Supervisor.

Item	Task Description	Response	
		Yes	No
1	Ductwork is clean and free of damage prior to installation	Yes	No
2	There are supports every 6 feet, or less as required	Yes	No
3	All latitudinal and longitudinal joints are sealed (<1% leakage required)	Yes	No
4	All equipment requiring maintenance is accessible (valves, junction boxes, etc.)	Yes	No
5	All duct openings temporary sealed to maintain duct system cleanliness	Yes	No
6	Record drawings have been updated to reflect any changes made	Yes	No

"No" Responses

Item	Reason for "No"

Briefly Detail Work Completed Today

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Fig. 12

XYZ Corporate Headquarters: VAV A-1

**VAV Terminal Construction Checklist**

XYZ Corporate Headquarters

Equipment Number: VAV A-1

**1) Model Verification**

A	Data to Verify:	Specified	Submitted	Installed
	Manufacturer			
	Model			
	CFM (Max/Min)	/	/	/
	Serial Number			
	Inlet Diameter, inches			
	Heating MBH/gpm			
	Fan Power, hp			
	Total Static Pressure, psig			

**2) Pre-Installation Checks**

The following must be completed upon delivery of equipment to the work-site.

		Contractor	Initials	Sign
A	<b>Physical Checks</b>	Mechanical		
	There is no physical damage to the box	yes / no		
	The air openings to the box are sealed with durable plastic	yes / no		
	The airflow sensing tubing is plugged	yes / no		
	The local disconnect is in the proper location	yes / no		
	The enclosure for the DDC control panel is in the proper location	yes / no		
	The grommets for the airflow sensing tubing are secure	yes / no		
	Unit tags affixed	yes / no		
B	<b>Component Verification</b>	Mechanical		
	Manufacturer's ratings are readable	yes / no		
	Manufacturer's ratings are accurate	yes / no		



FIG. 13

### 3) Physical Installation Checks

The following items need to be verified during installation. Fill in blanks with a checkmark, specific information, or circle "yes" or "no". For any negative responses, complete section 4.

		Contractor	Initials	DATE
<b>A</b>	<b>Hanging of Box</b>	<b>Mechanical</b>		
	Unit, damper, and air valve tags affixed	yes / no		
	Unit secured as required in specifications	yes / no		
	Adequate clearance around controls for O&M			
	6" clearance in front of air valve for travel of inner valve rod	yes / no		
	1 1/2 duct diameters before the air valve	yes / no		
	No duct transitions upstream of box for 30"	yes / no		
	No obstructions below box to remove bottom access panel	yes / no		
	Vibration isolators in good condition	yes / no		
	No metal to metal connections to cause noise problems	yes / no		
	Box properly labeled (box tag easy to see)	yes / no		
<b>B</b>	<b>Ductwork - Primary Air Inlet</b>	<b>Mechanical</b>		
	Primary ductwork all hard or maximum flex duct length of 1 foot	yes / no		
	All inlet elbows long radius and no kinks in flex duct	yes / no		
	1 1/2 duct diameters prior to air valve	yes / no		
	No transitions upstream for at least 36"	yes / no		
	Record drawings accurate	yes / no		
	Vibration isolator if flex duct is not used	yes / no		
<b>C</b>	<b>Ductwork - Outlet</b>	<b>Mechanical</b>		
	Vibration isolator in place with no holes	yes / no		
	No kinks in flex duct	yes / no		
	Record drawings accurate	yes / no		
<b>D</b>	<b>Controls</b>	<b>Controls</b>		
	Control wiring hooked up	yes / no		
	Temperature sensor hooked up	yes / no		
	Communication with central system	yes / no		
	Temperature sensor calibrated	yes / no		
	Cooling sequence of control correct (should be attached)	yes / no		
	Heating sequence of control correct (should be attached)	yes / no		
	Warm-up sequence of control correct (should be attached)	yes / no		
	Cool down sequence of control correct (should be attached)	yes / no		
Unoccupied sequence of control correct (should be attached)	yes / no			

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FIG. 14

E	Testing and Balancing (TAB)	TAB		
	Modifying unit / system settings throughout temperature sensor working	yes / no		
	Airflow sensor calibrated	yes / no		
	Actual min / max airflow (cfm)	/		

#### 4) Negative Responses

For each negative response in sections 2 and 3, record the reason and resolution below. Attach extra sheets as necessary.

A	Item	Reason for Negative Response	Resolution

2025-07-13 13:43:53


FIG. 15

**XYZ**XYZ Corporate  
Headquarters

**3D**

**Return to Supervisor**

Questions? Ask  
supervisor.



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